

# **Clinical Decision Support (CDS) Content and Health Level 7 (HL7)-Compliant Knowledge Artifacts (KNARTs)**

## **Primary Care: General Clinical Note - History and Physical Exam Clinical Content White Paper**

**Department of Veterans Affairs (VA)**



**Knowledge Based Systems (KBS)  
Office of Informatics and Information Governance (OIIG)  
Clinical Decision Support (CDS)**

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# Clinical Decision Support (CDS) Content and Health Level 7 (HL7)-Compliant Knowledge Artifacts (KNARTs): Primary Care: General Clinical Note - History and Physical Exam Clinical Content White Paper

by Department of Veterans Affairs (VA), , , and

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**Table 1. Relevant KNART Information: Primary Care: General Clinical Note - History and Physical Exam**

Primary Care KNART	Associated CLIN
General Clinical Note - History and Physical Exam - Documentation Template	CLIN0009CA

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1.1. Clinical Context Domains ..... 1

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# Introduction

The VA is committed to improving the ability of clinicians to provide care for patients while increasing quality, safety, and efficiency. Recognizing the importance of standardizing clinical knowledge in support of this goal, VA is implementing the Health Level 7 (*HL7*) Knowledge Artifact Specification for a wide range of VA clinical use cases. Knowledge Artifacts, referred to as (*KNARTs*), enable the structuring and encoding of clinical knowledge so the knowledge can be integrated with electronic health records to enable clinical decision support.

The purpose of this Clinical Content White Paper (*CCWP*) is to capture the clinical context and intent of *KNART* use cases in sufficient detail to provide the *KNART* authoring team with the clinical source material to construct the corresponding knowledge artifacts using the HL7 Knowledge Artifact Specification. This paper has been developed using material from a variety of sources: VA artifacts, clinical practice guidelines, evidence in the body of medical literature, and clinical expertise. After reviewing these sources, the material has been synthesized and harmonized under the guidance of VA subject matter experts to reflect clinical intent for this use case.

Unless otherwise noted, items within this white paper (e.g., documentation template fields, orderable items, etc.) are chosen to reflect the clinical intent at the time of creation. To provide an exhaustive list of all possible items and their variations is beyond the scope of this work.

---

# Conventions Used

Conventions used within the knowledge artifact descriptions include:

*<obtain>*: Indicates a prompt to obtain the information listed

- If possible, the requested information should be obtained from the underlying system(s). Otherwise, prompting the user for information may be required
- The technical and clinical comments associated with a section should be consulted for specific constraints on the information (e.g., time-frame, patient interview, etc.)
- Default Values: Unless otherwise noted, *<obtain>* indicates to obtain the most recent observation. It is recognized that this default time-frame value may be altered by future implementations

*[...]*: Square brackets enclose explanatory text that indicates some action on the part of the clinical user, or general guidance to the clinical or technical teams. Examples include, but are not limited to:

*[Begin ...], [End ...]*: Indicates the start and end of specific areas to clearly delineate them for technical purposes.

*[Activate ...]*: Initiates another knowledge artifact or knowledge artifact section.

*[Section Prompt: ...]*: If this section is applicable, then the following prompt should be displayed to the user.

*[Section Selection Behavior: ...]*: Indicates technical constraints or considerations for the selection of items outlined in the section prompt.

*[Attach: ...]*: Indicates that the specified item (e.g. procedure or result interpretation) should be attached to the documentation template if available.

*[Link: ...]*: Indicates that rather than attaching an item (e.g. image), a link should be included in the documentation template.

*[Clinical Comment: ...]*: Indicates clinical rationale or guidance.

*[Technical Note: ...]*: Indicates technical considerations or notes to be utilized for KNART authoring and at time of implementation planning.

*[If ...]*: Indicates the beginning of a conditional section.

*[Else, ...]*: Indicates the beginning of the alternative branch of a conditional section.

*[End if ...]*: Indicates the end of a conditional section.

- ☐ *[Check box]*: Indicates items that should be selected based upon the section selection behavior.

---

# Chapter 1. Primary Care: General Clinical Note - History and Physical Exam

## Clinical Context

[Begin Clinical Context.]

Capturing clinical information in a structured format greatly enhances its utility as a knowledge object. Applying such an approach to previously unstructured data, such as miscellaneous notes, will greatly increase its value.

**Table 1.1. Clinical Context Domains**

Target User	Primary Care Clinical providers
Patient	Adult Outpatients
Priority	Routine
Specialty	Primary Care
Location	Outpatient

[End Clinical Context.]

## Knowledge Artifacts

[Begin Knowledge Artifacts.]

This section describes the CDS knowledge artifact that is intended to facilitate documentation of information obtained during an initial primary care new patient visit. The documentation template includes the following sections: Chief complaint, history of present illness, review of systems, sexual assault, annual screening questionnaire, and health literacy assessment.

The knowledge artifact which defines this clinical use case is described in detail in the following sections:

Documentation Template: Primary Care: General Clinical Note - History and Physical Exam NART

Documents the information obtained during initial primary care new patient visit

Includes logic for appropriate display of documentation sections

[End Knowledge Artifacts.]

---

# Chapter 2. Primary Care: General Clinical Note - History and Physical Exam Documentation Template

[Begin Primary Care: General Clinical Note - History and Physical Exam Documentation Template.]

## Knowledge Narrative

[Begin Knowledge Narrative.]

[See Clinical Context in Chapter 1.]

[Technical Note: The Documentation template shall:

Allow for the efficient documentation of a general clinical note during initial patient evaluation; and

Adjust content presented to the clinician as needed during the evaluation; and

Pre-populate with existing data from the patient's medical record for review and editing by the end-user.]

[End Knowledge Narrative.]

## General Clinical Note

[Technical Note: The template will be structured as follows.]

### Demographics

[Begin Demographics.]

[Section Prompt: Demographics.]

<obtain> Patient Name

<obtain> Medical Record Number

<obtain> Attending Physician

<obtain> Other Current Clinical Providers

<obtain> Mental Health Providers

<obtain> Social Workers

<obtain> Residents (Include If Current)

<obtain> Other Providers

<obtain> Date of Birth

<obtain> Age (Years)

<obtain> Sex

<obtain> Self-Reported Gender Identity

<obtain> Race/Ethnicity

<obtain> Preferred Language

[Section Prompt: Translator Needed.]

[Section Selection Behavior: Select only one. Required.]

☐ Yes

☐ No

[End Demographics.]

## History

[Begin History.]

[Technical Note: The template will provide links to other targeted KNARTs where additional detail is needed.]

[Technical Note: Any information that can be obtained from the system should pre-populate the section fields in a manner that is apparent to the end user.]

[Technical Note: Any automatically obtained data should be editable by the user of the KNART.]

[Technical Note: The ability for the end user to enter multiples is necessary to be built during authoring.]

[Section Prompt: Visit Reason/Chief Complaint.]

- <obtain> Description

[Section Prompt: History of Present Illness.]

<obtain> Details of history of present illness

### Past Medical History

[Section Prompt: Past Medical History.]

<obtain> Past Medical History

### Surgical History

[Section Prompt: Surgical History.]

[Technical Note: Allow for multiple entry.]

<obtain>Surgical Procedure

<obtain>Surgical Date

### Mental Health History

[Section Prompt: Mental Health History]

[Technical Note: Link to future Mental Health History KNART.]

[Section Prompt: Are you currently seeing someone or taking medication for stress-related concerns, or for a mental health concern such as Post-Traumatic Stress Disorder (PTSD)?]

<obtain>Current Behavioral Health Condition and Treatment History

[Section Prompt: Have you ever received treatment (such as medication or counseling) for a stress-related concern, or for a mental health concern such as PTSD?]

<obtain>Past Behavioral Health Condition and Treatment History

[Section Prompt: Have you ever been to the Emergency Room or have you ever been hospitalized for a stress-related concern, or mental health concern such as PTSD?]

<obtain>Emergency Room or Hospital Behavioral Health Condition and Treatment History

### **Military History**

[Section Prompt: Military History.]

[Technical Note: Please enable entry of multiple instances of “Military occupation”, “Separation from service date” and “Branch of service”]

<obtain> Military occupation

<obtain> Military Exposure (Agent Orange, etc.)

<obtain> Years of Service

<obtain> Separation from service date

<obtain> Branch of Service

<obtain> Overseas Travel

<obtain> Conflict History

<obtain> Additional Details

### **Medication History**

[Section Prompt: Medication History.]

[Technical Note: Link to future Medication Reconciliation KNART.]

[Technical Note: “Recently Expired Medications” is defined in the VA’s “ESSENTIAL MEDICATION INFORMATION STANDARDS” directive as “within the past 90 to 120 days”. The directive is located at: [http://www.va.gov/vhapublications/ViewPublication.asp?pub\\_ID=3119](http://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=3119) (follow the links in Appendix A).]

<obtain> Current Prescribed Medications

<obtain> Current Over-the-Counter (OTC) Medications

[Technical Note: The following field should be completed automatically.]

<obtain> Recently Expired Medications

### **Allergies and Adverse Reactions**

[Section Prompt: Allergies and Adverse Reactions.]

<obtain> Allergies and Adverse Reactions

### **Family Medical History**

[Section Prompt: Family Medical History.]

[Technical Note: Link to Family Health History KNART.]

<obtain> Family Medical History

### **Preventative Services History**

[Section Prompt: Preventative Services History.]

[Technical Note: Provide the following links to the user of this KNART: <https://www.medicare.gov/coverage/preventive-and-screening-services.html>; <https://www.prevention.va.gov/>; [https://www.prevention.va.gov/Healthy\\_Living/Get\\_Recommended\\_Screening\\_Tests\\_and\\_Immunizations\\_for\\_Men.asp](https://www.prevention.va.gov/Healthy_Living/Get_Recommended_Screening_Tests_and_Immunizations_for_Men.asp); [https://www.prevention.va.gov/Healthy\\_Living/Get\\_Recommended\\_Screening\\_Tests\\_and\\_Immunizations\\_for\\_Women.asp](https://www.prevention.va.gov/Healthy_Living/Get_Recommended_Screening_Tests_and_Immunizations_for_Women.asp)] [[https://www.prevention.va.gov/Healthy\\_Living/Get\\_Recommended\\_Screening\\_Tests\\_and\\_Immunizations\\_for\\_Women.asp](https://www.prevention.va.gov/Healthy_Living/Get_Recommended_Screening_Tests_and_Immunizations_for_Women.asp)]

<obtain> Preventative Services History

### **Personal and Social History**

[Section Prompt: Living Situation/Social Support/Financial Support.]

<obtain> Living Situation

<obtain> Marital Status/Domestic Status

<obtain> Current Occupation

<obtain> Level of Education

<obtain> Additional Personal, Social, and Employment History

[Section Prompt: Substance Use.]

<obtain> Alcohol

<obtain> Tobacco

<obtain> Illicit drug(s)

[Section Prompt: Sexual and Abuse History.]

<obtain> Sexual Activity

<obtain> Sexual Assault/Abuse History

<obtain> Military Sexual Trauma History

<obtain> Physical or Other Assault/Abuse History

[Section Prompt: Disability Rating.]

<obtain> Military disability % rating and associated service connected conditions.

### **Review of Systems**

[Section Prompt: Review of Systems.]

[Section Prompt: Complete only relevant sections if complete history and physical not intended.]

[Technical Note: Link to Review of Systems KNART (not currently available).]

<obtain> Constitutional Symptoms (for example, fever, weight loss)

<obtain> Eyes

<obtain> Ears, nose, mouth, throat

<obtain> Cardiovascular

<obtain> Respiratory

<obtain> Gastrointestinal

<obtain> Genitourinary

<obtain> Musculoskeletal

<obtain> Integumentary (skin and/or breast)

<obtain> Neurological

<obtain> Psychiatric

<obtain> Endocrine

<obtain> Hematologic/Lymphatic

<obtain> Allergic/Immunologic

[End History.]

## Screening

[Begin Screening.]

[Technical Note: The template will provide links to other targeted KNARTs where additional detail is needed.]

[Screen Prompt: Screening.]

<obtain> Health Literacy

<obtain> Cognition

<obtain> Self-Reported Health Rating

<obtain> Nutrition/Diet

<obtain> Exercise/Physical Activity

[Technical Note: Link to Clinical Reminder for alcohol use screening if there is one available.]

<obtain> Alcohol Use

[Technical Note: Link to Tobacco Assessment and Cessation Counseling KNART.]

<obtain> Tobacco Use

<obtain> Substance Use (Including Prescription Drugs)

[Technical Note: Link to Consult for Depression and Suicide Risk Assessment KNARTs.]

<obtain> Consult for Depression

<obtain> Suicide Risk Assessment

[Technical Note: Link to PTSD Screening and Assessment and Suicide Risk Assessment KNARTs.]



<obtain> PTSD history

<obtain> Suicide Risk Assessment

[Clinical Comment: Scale is 0-10 for the pain instrument below.]

<obtain> Pain Level (0-10)

[Section Prompt: Functional Assessment.]

[Technical Note: Provide user a link to the Katz Index of ADLs and Lawton-Brody Instrumental Activities of Daily Living scale: [https://clas.uiowa.edu/socialwork/sites/clas.uiowa.edu/socialwork/files/NursingHomeResource/documents/Katz%20ADL\\_LawtonIADL.pdf](https://clas.uiowa.edu/socialwork/sites/clas.uiowa.edu/socialwork/files/NursingHomeResource/documents/Katz%20ADL_LawtonIADL.pdf)

<obtain> Safety (Including Fall Risk, If Appropriate)

<obtain> Additional Risk Factors

[Section Prompt: Advance Directive Confirmed Accessible to Providers.]

☐ Yes

<obtain> Additional Details

☐ No

[End Screening.]

## Physical Examination

[Begin Physical Examination.]

[Section Prompt: Vital Signs.]

[Technical Note: Any information that can be obtained from the system should pre-populate the section fields in a manner that is apparent to the end user.]

<obtain> Systolic Blood Pressure (BP) (mm Hg)

<obtain> Diastolic BP (mm Hg)

<obtain> Temperature (°F)

<obtain> Heart Rate beats per minutes (bpm)

<obtain> Respiratory rate breaths per minute

<obtain> Oxygen Saturation (%)

<obtain> Height (Inches)

<obtain> Weight (Pounds)

[Technical Note: Body mass index (BMI) should be calculated and provided below, in kilograms per square meter ( $\text{kg}/\text{m}^2$ ), using the formula  $\text{BMI} = 703 \times \text{weight (pounds)} / \text{height (inches)}^2$ .]

<obtain> Body Mass Index ( $\text{kg}/\text{m}^2$ )

<obtain> Waist Circumference (Centimeters)

[Section Prompt: Physical Exam.]

<obtain> Head, Eyes, Ears, Nose, Throat (HEENT) Exam

<obtain> Neck Exam

<obtain> Cardiovascular Exam

<obtain> Pulmonary Exam

<obtain> Abdominal Exam

<obtain> Genitourinary Exam

<obtain> Extremities Exam

<obtain> Musculoskeletal Exam

<obtain> Skin Exam

<obtain> Neurological Exam

[Section Prompt: Laboratory Results.]

[Technical Note: The following field should be completed automatically if results are available.]

[Technical Note: Provide access to all lab data, with ability to filter by lab type or date.]

<obtain> Laboratory Test Results

[Section Prompt: Imaging Results.]

[Technical Note: Images should be attached automatically if text is provided for the following field.]

[Technical Note: Provide access to all images, with ability to filter by image type or date.]

<obtain> Imaging Study Reports

<link> Image

[End Physical Examination.]

## Assessment and Plan

[Begin Assessment.]

[Section Prompt: Assessment.]

<obtain> Details

☐ Assessments and Plan, Including Risks and Benefits of Recommended Treatment, Discussed with Patient

[End Assessment.]

[Begin Plan.]

<obtain> Plan of Treatment

<obtain> Preventive Services

[Technical Note: Provide links to:

National Center for Health Promotion and Disease Prevention's Get Recommended Screening Tests and Immunizations for Men [[https://www.prevention.va.gov/Healthy\\_Living/Get\\_Recommended\\_Screening\\_Tests\\_and\\_Immunizations\\_for\\_Men.asp](https://www.prevention.va.gov/Healthy_Living/Get_Recommended_Screening_Tests_and_Immunizations_for_Men.asp)]

Primary Care: General Clinical  
Note - History and Physical  
Exam Documentation Template

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Get Recommended Screening Tests and Immunizations for Women [[https://www.prevention.va.gov/Healthy\\_Living/Get\\_Recommended\\_Screening\\_Tests\\_and\\_Immunizations\\_for\\_Women.asp](https://www.prevention.va.gov/Healthy_Living/Get_Recommended_Screening_Tests_and_Immunizations_for_Women.asp)]

U.S. Preventive Services Task Force's (USPSTF) A and B Recommendations [<https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations>]]

<obtain> Preventive Counseling

<obtain> Patient Education

[Technical Note: Provide link [www.veteranshealthlibrary.org](http://www.veteranshealthlibrary.org) [<http://www.veteranshealthlibrary.org>]]

<obtain> Self-Management Education

[Section Prompt: Medications Plan.]

<obtain> CurrentMedications

☐ Continue Medications

<obtain> Continued Medications

☐ Discontinue Medications

<obtain> Discontinued Medications

[Technical Note: If either of the following – "Modified Medications" or "New Medications" – are selected, the clinician should be able to select and attach relevant order sets.]

☐ Modified Medications

<obtain> Modified Medications

☐ New Medications

<obtain> New Medications

[Technical Note: Provide link to Medication Reconciliation KNART as available.]

<obtain> Other Plans

[Section Prompt: Consultations?]

<obtain> Consultations

<obtain> Consult specifics

[Section Prompt: Next Visit?]

<obtain> Next visit date

☐ Labs/imaging results were reviewed with the patient.

☐ Patient Expresses Understanding and Agrees with Plan

[End Plan.]

[End Primary Care: General Clinical Note - History and Physical Exam Documentation Template.]

---

# Bibliography/Evidence

- [Denny, 2008] JC Denny, RA Miller, KB Johnson, and A Spickard. “Development and evaluation of a clinical note section header terminology”. *AMIA Annu Symp Proc* 2008. 2008. 156-160.
- [Goetzel, 2011] RZ Goetzel, P Staley, L Ogden, and et al. “U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. A framework for patient-centered health risk assessments – providing health promotion and disease prevention services to Medicare beneficiaries.”. *Centers for Disease Control and Prevention Website*. <https://www.cdc.gov/policy/hst/hra/frameworkforhra.pdf>. Published 2011. Accessed August 29, 2017.
- National Center for Health Promotion and Disease Prevention. *Get Recommended Screening Tests and Immunizations for Men*. [https://www.prevention.va.gov/Healthy\\_Living/Get\\_Recommended\\_Screening\\_Tests\\_and\\_Immunizations\\_for\\_Men.asp](https://www.prevention.va.gov/Healthy_Living/Get_Recommended_Screening_Tests_and_Immunizations_for_Men.asp). Accessed August 29, 2017.
- National Center for Health Promotion and Disease Prevention. *Get Recommended Screening Tests and Immunizations for Women*. [https://www.prevention.va.gov/Healthy\\_Living/Get\\_Recommended\\_Screening\\_Tests\\_and\\_Immunizations\\_for\\_Women.asp](https://www.prevention.va.gov/Healthy_Living/Get_Recommended_Screening_Tests_and_Immunizations_for_Women.asp). Accessed August 29, 2017.
- [Section 4103 of the Affordable Care Act] “Medicare coverage and payment of the annual wellness visit providing a personalized prevention plan under Medicare Part B”. *FedRegist*. 2011. 76. 228. 42 CFR §410, §414, §415, and §495..
- The Opioid Therapy for Chronic Pain Work Group. *VA/DoD Clinical Practice Guideline for Opioid Therapy for Chronic Pain*. <https://www.healthquality.va.gov/guidelines/Pain/cot/VADoDOTCPG022717.pdf>. Published February 2017.
- U.S. Preventive Services Task Force. *USPSTF A and B Recommendations*. <https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations/>. Updated April 2017.

# Appendix A. Existing Sample VA Artifacts

The following artifacts are from the VA National Primary Care Note Template.

**Figure A.1. VA National Primary Care Note Template: VA Primary Care New Patient - Visit/Chief Complaint and Past History Sections**

The screenshot shows a software window titled "Template: VA PC New Patient". It contains two main sections: "REASON FOR VISIT/CHIEF COMPLAINT:" and "PAST HISTORY:". The first section includes checkboxes for "Acute problem(s)", "Chronic problem(s)", "Health maintenance", "Related to MVA/Accident", and "Work-related". It also has a text area for describing the symptom and a list of "SOURCE(S) OF HISTORY" with checkboxes for "Patient", "Family", "Outside records", "VA records", and "Unobtainable". The second section includes checkboxes for "ADULT ILLNESS:", "CHILDHOOD ILLNESS:", "SURGERIES", "INJURIES:", and "FEMALE GENDER SPECIFIC HISTORY:". The "FEMALE GENDER SPECIFIC HISTORY:" section includes fields for "AGE AT MENARCHE:", "DATE LAST MENSTRUAL PERIOD:", "DESCRIBE MENSES:", "BIRTH CONTROL:", and "PREGNANCIES/MISCARRIAGES/ABORTIONS:". At the bottom, there are buttons for "All", "None", "Preview", "OK", and "Cancel", along with a note "\* Indicates a Required Field".

Template: VA PC New Patient

☒ REASON FOR VISIT/CHIEF COMPLAINT:  
(Describe symptom, problem, condition, diagnosis in patient's words if possible)

☐ Acute problem(s) ☒ Chronic problem(s) ☐ Health maintenance  
☐ Related to MVA/Accident ☐ Work-related

(HPI: include location, quality, severity, duration, modifying factors & associated signs/symptoms)

SOURCE(S) OF HISTORY: ☐ Patient ☐ Family ☐ Outside records ☐ VA records ☐ Unobtainable  
(If history obtained from family member, specify which family member)  
(If unobtainable, specify reason such as coma, dementia, aphasia, psychosis)

☒ PAST HISTORY:

☐ ADULT ILLNESS: ☒ HTN ☐ Diabetes ☐ CAD/IHD ☐ Hyperlipidemia ☐ CVA

☐ CHILDHOOD ILLNESS:

☐ SURGERIES

☐ INJURIES:

☐ FEMALE GENDER SPECIFIC HISTORY:  
AGE AT MENARCHE:   
DATE LAST MENSTRUAL PERIOD:   
DESCRIBE MENSES:   
BIRTH CONTROL: ☐ None ☐ Pill ☐ Diaphragm  
PREGNANCIES/MISCARRIAGES/ABORTIONS:

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.2. VA National Primary Care Note Template: VA Primary Care New Patient - Female Gender Specific History and Social History Section**

Template: VA PC New Patient

☒ **FEMALE GENDER SPECIFIC HISTORY:**

AGE AT MENARCHE:

DATE LAST MENSTRUAL PERIOD:

DESCRIBE MENSES:

BIRTH CONTROL: ☐ None ☐ Pill ☐ Diaphragm

PREGNANCIES/MISCARRIAGES/ABORTIONS:

Number of full term pregnancies:

Number of spontaneous abortions:

Number of therapeutic abortions:

Number of other types Abortions:

Age at first pregnancy:

DATE LAST PAP SMEAR:  RESULTS:

DATE LAST MAMMOGRAM:  RESULTS:

☒ **SOCIAL HISTORY: (HABITS/MARITAL STATUS/MISC)**

☒ **HABITS:** (If pt drinks, indicate amount by clicking first down arrow. If past hx of alcohol abuse or currently enrolled in alcohol program click second down arrow)

☐ ALCOHOL? ☒ No alcohol in past year ☒ (+) Alcohol use

☐ TOBACCO? ☒ Lifelong Non-user. ☒ Ex-tobacco user ☒ Current user.

☐ ILLICIT DRUGS? ☒ Never used. ☒ Past user. ☒ Present user.

☐ (Select to add additional text)

☐ **MARITAL/DOMESTIC STATUS:**

Living arrangements:

☒ Married. ☒ Widowed. ☒ Divorced. ☒ Single. ☒ Separated. ☒ Other (give details):

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.3. VA National Primary Care Note Template: VA Primary Care New Patient - Marital/Domestic Status Section**

Template: VA PC New Patient

☒ MARITAL/DOMESTIC STATUS:

Living arrangements: ☐ Married. ☐ Widowed. ☐ with spouse/partner  
☐ with children  
☐ with parents  
☐ with extended family  
☐ with friend/caregiver  
☐ alone  
☐ residential living facility  
☐ nursing home  
☐ homeless  
☐ other:

☐ OTHER: (Include: Education, habits, etc.)

☐ (SOCIAL HISTORY - MILITARY/SEX)

☐ ALLERGIES AS DISPLAYED IN VISTA:  
 SULFA-GYN, LORAZEPAM, SULFABENZAMIDE/SULFACETAMIDE/SULFATHIAZOLE, IODINE, LATEX  
 TERAZOSIN, DIPHENHYDRAMINE 12.5MG/5ML ELX, TAPE, CHOCOLATE, ORANGE JUICE  
 POWDER FREE GLOVES, SEAFOOD, PENICILLIN, PLASTIC TAPE, VASELINE, GOLDENROD  
 SKELAXIN 800MG TAB, BUTTER, ACTIVASE, AMOXICILLIN, DOCUSATE/MINERAL OIL, MANGOS  
 GREEN BELL PEPPERS, HAIR SPRAY, MILK, LUBRICANT, VAGINAL, SHELLFISH, CURRY  
 MAYONNAISE, HONEY BEE STINGS, GREEN TEA, MUSTARD, STRAWBERRIES, SIMVASTATIN  
 FOOD DYES, MORPHINE, HEPARIN, APPLE CIDER VINEGAR, ASPIRIN RELATED MEDICATIONS  
 IBUPROFEN/PSEUDOEPHEDRINE, BEE STINGS, DUST  
 (Inquire about any changes since VISTA was last updated.)  
 Patient/family state(s): ☒ No new allergies ☐ (+) New allergies:

☐ MEDICATIONS (as listed in Vista):  
 Active Outpatient Medications (excluding Supplies):

Active Outpatient Medications	Status
1) ACETAMINOPHEN 325MG TAB TAKE ONE TABLET BY MOUTH EVERY 6 HOURS AS NEEDED FOR PAIN	ACTIVE
2) CIMETIDINE 400MG TAB TAKE ONE TABLET BY MOUTH TWICE A DAY BEFORE MEALS AS NEEDED FOR STOMACH ACID	ACTIVE

☐ OTC OR NON-VA PRESCRIPTION MEDICATIONS: (List OTC meds, herbals, vitamins & ASA)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.4. VA National Primary Care Note Template: VA Primary Care New Patient - Marital/Domestic Status, Social History and Military History (Branch of Service)**

Template: VA PC New Patient

☒ **MARITAL/DOMESTIC STATUS:**  
 Living arrangements:   
☐ Married. ☐ Widowed. ☐ Divorced. ☐ Single. ☐ Separated. ☐ Other (give details):

☒ **OTHER:** (Include: Education, Occupation, Travel hx, Exercise habits, etc.)

☒ **(SOCIAL HISTORY - MILITARY/SEXUAL/ABUSE)**

☒ **MILITARY HISTORY:**  
 BRANCH OF SERVICE:  Was patient a POW? - ☐ Yes ☐ No  
 PERIOD OF SERVICE:   
 SPECIFIC YEARS OF SERVICE:   
 ENVIRONMENTAL EXPOSURE:

☐ **SEXUALLY ACTIVE?** ☐ Yes ☐ No  
 (Comment on: Preference, multiple partners, use of protection, etc.)

☐ **SCREEN FOR PHYSICAL/PSYCHOLOGICAL/SEXUAL ABUSE:**  
 (If patient reports abuse click on down arrow and indicate type of abuse)  
☒ Denies abuse ☐ Reports abuse: (Type of abuse:)   
☐ Past abuse ☐ Recent abuse ☐ Ongoing abuse

☐ **ALLERGIES AS DISPLAYED IN VISTA:**  
 SULFA-GYN, LORAZEPAM, SULFABENZAMIDE/SULFACETAMIDE/SULFATHIAZOLE, IODINE, LATEX  
 TERAZOSIN, DIPHENHYDRAMINE 12.5MG/5ML ELX, TAPE, CHOCOLATE, ORANGE JUICE  
 POWDER FREE GLOVES, SEAFOOD, PENICILLIN, PLASTIC TAPE, VASELINE, GOLDENROD  
 SKELAXIN 800MG TAB, BUTTER, ACTIVASE, AMOXICILLIN, DUCOSATE/MINERAL OIL, MANGOS  
 GREEN BELL PEPPERS, HAIR SPRAY, MILK, LUBRICANT, VAGINAL, SHELLFISH, CURRY  
 MAYONNAISE HONEY BEE STINGS GREEN TEA MUSTARD STRAWBERRIES SIMVASTATIN

All None \* Indicates a Required Field Preview OK Cancel



**Figure A.5. VA National Primary Care Note Template: VA Primary Care New Patient - Marital/Domestic Status, Social History and Military History Sections (Period of Service)**

Template: VA PC New Patient

☒ MARITAL/DOMESTIC STATUS:  
 Living arrangements:   
☐ Married. ☐ Widowed. ☐ Divorced. ☐ Single. ☐ Separated. ☐ Other (give details):

☒ OTHER: (Include: Education, Occupation, Travel hx, Exercise habits, etc.)

☒ (SOCIAL HISTORY - MILITARY/SEXUAL/ABUSE)

☒ MILITARY HISTORY:  
 BRANCH OF SERVICE:  Was patient a POW? - ☐ Yes ☐ No  
 PERIOD OF SERVICE:   
 SPECIFIC YEARS OF SERVICE: WWII (Dec 1941-Dec 1946)  
 ENVIRONMENTAL EXPOSURE: Korean War (July 1950-January 1955)  
 Vietnam era (Aug 1964-April 1975)  
 Persian Gulf (Aug 1990- )  
 Other

☐ SEXUALLY ACTIVE? ☒ Yes ☐ No  
 (Comment on: Preference, multiple partners, use of protection, etc.)

☐ SCREEN FOR PHYSICAL/PSYCHOLOGICAL/SEXUAL ABUSE:  
 (If patient reports abuse click on down arrow and indicate type of abuse)  
☒ Denies abuse ☐ Reports abuse: (Type of abuse:)   
☐ Past abuse ☐ Recent abuse ☐ Ongoing abuse

☐ ALLERGIES AS DISPLAYED IN VISTA:  
 SULFA-GYN, LORAZEPAM, SULFABENZAMIDE/SULFACETAMIDE/SULFATHIAZOLE, IODINE, LATEX  
 TERAZOSIN, DIPHENHYDRAMINE 12.5MG/5ML ELX, TAPE, CHOCOLATE, ORANGE JUICE  
 POWDER FREE GLOVES, SEAFOOD, PENICILLIN, PLASTIC TAPE, VASELINE, GOLDENROD  
 SKELAXIN 800MG TAB, BUTTER, ACTIVASE, AMOXICILLIN, DUCSATE/MINERAL OIL, MANGOS  
 GREEN BELL PEPPERS, HAIR SPRAY, MILK, LUBRICANT, VAGINAL, SHELLFISH, CURRY  
 MAYONNAISE HONEY BEE STINGS GREEN TEA MUSTARD STRAWBERRIES SIMVASTATIN

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.6. VA National Primary Care Note Template: VA Primary Care New Patient - Marital/Domestic Status, Social History, Military History and Screen for Physical/Psychological/Sexual Abuse Sections**

Template: VA PC New Patient

☒ **MARITAL/DOMESTIC STATUS:**  
 Living arrangements:   
☐ Married. ☐ Widowed. ☐ Divorced. ☐ Single. ☐ Separated. ☐ Other (give details):

☒ **OTHER:** (Include: Education, Occupation, Travel hx, Exercise habits, etc.)

☒ **(SOCIAL HISTORY - MILITARY/SEXUAL/ABUSE)**

☒ **MILITARY HISTORY:**  
 BRANCH OF SERVICE:  Was patient a POW? - ☐ Yes ☐ No  
 PERIOD OF SERVICE:   
 SPECIFIC YEARS OF SERVICE   
 ENVIRONMENTAL EXPOSURE:

☐ **SEXUALLY ACTIVE?** ☒ Yes ☐ No  
 (Comment on: Preference, multiple partners, use of protection, etc.)

☒ **SCREEN FOR PHYSICAL/PSYCHOLOGICAL/SEXUAL ABUSE:**  
 (If patient reports abuse click on down arrow and indicate type of abuse)  
☐ Denies abuse ☒ Reports abuse: (Type of abuse:)   
☐ Past abuse ☐ Recent abuse

☐ **ALLERGIES AS DISPLAYED IN VISTA:**  
 SULFA-GYN, LORAZEPAM, SULFABENZAMIDE/SULFACETAMIDE/SULFATHIAZOLE, IODINE, LATEX  
 TERAZOSIN, DIPHENHYDRAMINE 12.5MG/5ML ELX, TAPE, CHOCOLATE, ORANGE JUICE  
 POWDER FREE GLOVES, SEAFOOD, PENICILLIN, PLASTIC TAPE, VASELINE, GOLDENROD  
 SKELAXIN 800MG TAB, BUTTER, ACTIVASE, AMOXICILLIN, DOCUSATE/MINERAL OIL, MANGOS  
 GREEN BELL PEPPERS, HAIR SPRAY, MILK, LUBRICANT, VAGINAL, SHELLFISH, CURRY  
 MAYONNAISE HONEY BEE STINGS GREEN TEA MUSTARD STRAWBERRIES SIMVASTATIN

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.7. VA National Primary Care Note Template: VA Primary Care New Patient - Allergies as Displayed in VistA, Medications, Over the Counter (OTC) or Non-VA Prescription Medications, and Family History Sections**

Template: VA PC New Patient

☒ ALLERGIES AS DISPLAYED IN VISTA:  
 SULFA-GYN, LORAZEPAM, SULFABENZAMIDE/SULFACETAMIDE/SULFATHIAZOLE, IODINE, LATEX  
 TERAZOSIN, DIPHENHYDRAMINE 12.5MG/5ML ELX, TAPE, CHOCOLATE, ORANGE JUICE  
 POWDER FREE GLOVES, SEAFOOD, PENICILLIN, PLASTIC TAPE, VASELINE, GOLDENROD  
 SKELAXIN 800MG TAB, BUTTER, ACTIVASE, AMOXICILLIN, DUCOSATE/MINERAL OIL, MANGOS  
 GREEN BELL PEPPERS, HAIR SPRAY, MILK, LUBRICANT, VAGINAL, SHELLFISH, CURRY  
 MAYONNAISE, HONEY BEE STINGS, GREEN TEA, MUSTARD, STRAWBERRIES, SIMVASTATIN  
 FOOD DYES, MORPHINE, HEPARIN, APPLE CIDER VINEGAR, ASPIRIN RELATED MEDICATIONS  
 IBUPROFEN/PSEUDOEPHEDRINE, BEE STINGS, DUST  
 (Inquire about any changes since VISTA was last updated.)  
 Patient/family state(s): ☐ No new allergies ☒ (+) New allergies:  
 \_\_\_\_\_

☒ MEDICATIONS (as listed in Vista):  
 Active Outpatient Medications (excluding Supplies):

Active Outpatient Medications	Status
1) ACETAMINOPHEN 325MG TAB TAKE ONE TABLET BY MOUTH EVERY 6 HOURS AS NEEDED FOR PAIN	ACTIVE
2) CIMETIDINE 400MG TAB TAKE ONE TABLET BY MOUTH TWICE A DAY BEFORE MEALS AS NEEDED FOR STOMACH ACID	ACTIVE

\_\_\_\_\_

☒ OTC OR NON-VA PRESCRIPTION MEDICATIONS: (List OTC meds, herbals, vitamins & ASA)  
 \_\_\_\_\_

☒ FAMILY HISTORY: (Include pertinent family history. Inquire about family hx  
 of colorectal cancer, gender specific cancers, DM, CAD/IHD)  
 \_\_\_\_\_

☐ REVIEW OF SYSTEMS (Include at least ONE system from one of the following: Constitutional,  
 Eyes, Ears/Nose/Mouth/Throat, Cardiovascular, Respiratory, GI, GU,  
 Musculoskeletal, Skin/Hair, Neuro, Psych, Endocrine, Hematologic/  
 Lymphatic, Allergy/Immune System)

\* Indicates a Required Field

**Figure A.8. VA National Primary Care Note Template: VA Primary Care New Patient - Review of Systems Section**

Template: VA PC New Patient

☒ REVIEW OF SYSTEMS (Include at least ONE system from one of the following: Constitutional, Eyes, Ears/Nose/Mouth/Throat, Cardiovascular, Respiratory, GI, GU, Musculoskeletal, Skin/Hair, Neuro, Psych, Endocrine, Hematologic/Lymphatic, Allergy/Immune System)

☒ (Click here for expanded point and click format) Review of Systems

☒ Constitutional:

☐ (+)Positive symptoms reported:

☐ Fevers, chills, weakness, nights sweats and weight change

☐ Fevers

☐ Chills

☐ Weakness

☐ Night Sweats

☐ Weight loss (unintentional)

☐ Weight gain (unintentional)

☒ (-)Negative for:

☐ Fevers, chills, weakness, nights sweats and weight change

☐ Fevers

☐ Chills

☐ Weakness

☐ Night Sweats

☐ Weight loss (unintentional)

☐ Weight gain (unintentional)

☐ Eyes:

☐ Ears:

☐ Nose:

☐ Mouth/Dental:

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.9. VA National Primary Care Note Template: VA Primary Care New Patient - Review of Systems, Eyes Negative for Symptoms Section**

Template: VA PC New Patient

☒ REVIEW OF SYSTEMS (Include at least ONE system from one of the following: Constitutional, Eyes, Ears/Nose/Mouth/Throat, Cardiovascular, Respiratory, GI, GU, Musculoskeletal, Skin/Hair, Neuro, Psych, Endocrine, Hematologic/Lymphatic, Allergy/Immune System)

☒ (Click here for expanded point and click format) Review of Systems

☐ Constitutional:

☒ Eyes:

☐ (+)Positive symptoms reported:

☐ eye pain, blurred vision, double vision

☐ eye pain

☐ vision change

☐ double vision

☐ blurred vision

☐ problems reading

☐ problems distance vision

☐ night problems

☒ (-)Negative for (Patient denies symptoms of):

☐ eye pain, blurred vision, double vision

☐ eye pain

☐ vision change

☐ double vision

☐ blurred vision

☐ problems reading

☐ problems distance vision

☐ night problems

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.10. VA National Primary Care Note Template: VA Primary Care New Patient - Nose Positive Symptoms Reported Section**

The screenshot shows a software window titled "Template: VA PC New Patient". The window contains a list of checkboxes for various body systems. The "Nose" checkbox is checked. Under "Nose", there are two sub-sections: "(+)Positive symptoms reported:" and "(-)Negative for (Patient denies symptoms of):". Each sub-section has a list of checkboxes for specific symptoms: "loss of smell, frequent colds, epistaxis, postnasal drip", "loss of smell", "frequent colds", "epistaxis", and "postnasal drip". Below the "Nose" section, there are checkboxes for "Mouth/Dental:", "Breast:", "Cardiac:", "Respiratory:", "GI/Digestive:", "GU/Urologic:", "Blood/Lymphatic:", "Endocrine:", "Musculoskeletal:", "Neurologic:", and "Skin:". At the bottom of the window, there is a "Comments:" section with a text area. The bottom of the window features a toolbar with buttons for "All", "None", "\* Indicates a Required Field", "Preview", "OK", and "Cancel".

☐ Eyes:

☐ Ears:

☒ Nose:

☐ (+)Positive symptoms reported:

☐ loss of smell, frequent colds, epistaxis, postnasal drip

☐ loss of smell

☐ frequent colds

☐ epistaxis

☐ postnasal drip

☐ (-)Negative for (Patient denies symptoms of):

☐ loss of smell, frequent colds, epistaxis, postnasal drip

☐ loss of smell

☐ frequent colds

☐ epistaxis

☐ postnasal drip

☐ Mouth/Dental:

☐ Breast:

☐ Cardiac:

☐ Respiratory:

☐ GI/Digestive:

☐ GU/Urologic:

☐ Blood/Lymphatic:

☐ Endocrine:

☐ Musculoskeletal:

☐ Neurologic:

☐ Skin:

☐ (Comments:)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.11. VA National Primary Care Note Template: VA Primary Care New Patient - Ears with Positive Symptoms Reported and Negative for Symptoms Sections**

The screenshot shows a software window titled "Template: VA PC New Patient". The window contains a form with several sections. The "Ears:" section is checked and contains two sub-sections: "(+)Positive symptoms reported:" and "(-)Negative for (Patient denies symptoms of):". Each sub-section has a list of symptoms with checkboxes: "Hearing loss, tinnitus, pain pain or discharge, vertigo", "Hearing loss", "tinnitus", "pain pain or discharge", and "vertigo". Below the "Ears:" section are several other sections, each with a checkbox: "Nose:", "Mouth/Dental:", "Breast:", "Cardiac:", "Respiratory:", "GI/Digestive:", "GU/Urologic:", "Blood/Lymphatic:", "Endocrine:", "Musculoskeletal:", "Neurologic:", and "Skin:". At the bottom of the window, there is a row of buttons: "All", "None", "\* Indicates a Required Field", "Preview", "OK", and "Cancel".

Template: VA PC New Patient

☒ Ears:

☒ (+)Positive symptoms reported: [Text Box]

☐ Hearing loss, tinnitus, pain pain or discharge, vertigo

☐ Hearing loss

☐ tinnitus

☐ pain pain or discharge

☐ vertigo

☒ (-)Negative for (Patient denies symptoms of): [Text Box]

☐ Hearing loss, tinnitus, pain pain or discharge, vertigo

☐ Hearing loss

☐ tinnitus

☐ pain pain or discharge

☐ vertigo

☐ Nose:

☐ Mouth/Dental:

☐ Breast:

☐ Cardiac:

☐ Respiratory:

☐ GI/Digestive:

☐ GU/Urologic:

☐ Blood/Lymphatic:

☐ Endocrine:

☐ Musculoskeletal:

☐ Neurologic:

☐ Skin:

☐ (Comments): [Text Box]

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.12. VA National Primary Care Note Template: VA Primary Care New Patient - Mouth/Dental Section**

Template: VA PC New Patient

☐ Eyes:

☐ Ears:

☐ Nose:

☒ Mouth/Dental:

☐ (+)Positive symptoms reported:

☐ sores, bleeding gums, hoarseness, dentures, change in taste

☐ sores

☐ bleeding gums

☐ hoarseness

☐ dentures

☐ change in taste

☐ (-)Negative for (Patient denies symptoms of):

☐ sores, bleeding gums, hoarseness, dentures, change in taste

☐ sores

☐ bleeding gums

☐ hoarseness

☐ dentures

☐ change in taste

☐ Breast:

☐ Cardiac:

☐ Respiratory:

☐ GI/Digestive:

☐ GU/Urologic:

☐ Blood/Lymphatic:

☐ Endocrine:

☐ Musculoskeletal:

☐ Neurologic:

All None \* Indicates a Required Field Preview OK Cancel



**Figure A.13. VA National Primary Care Note Template: VA Primary Care New Patient - Breast Section**

Template: VA PC New Patient

☐ Eyes:

☐ Ears:

☐ Nose:

☐ Mouth/Dental:

☒ Breast:

☐ (+)Positive symptoms reported:

☐ masses, discharge

☐ masses

☐ discharge

☐ (-)Negative for (Patient denies symptoms of):

☐ masses, discharge

☐ masses

☐ discharge

☐ Cardiac:

☐ Respiratory:

☐ GI/Digestive:

☐ GU/Urologic:

☐ Blood/Lymphatic:

☐ Endocrine:

☐ Musculoskeletal:

☐ Neurologic:

☐ Skin:

☐ (Comments:)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.14. VA National Primary Care Note Template: VA Primary Care New Patient - Cardiac Section**

Template: VA PC New Patient

☐ Eyes:

☐ Ears:

☐ Nose:

☐ Mouth/Dental:

☐ Breast:

☒ Cardiac:

☐ (+)Positive symptoms reported:

☐ Chest pain, HTN, PND, DOE, Palpitations

☐ Chest pain

☐ HTN

☐ PND

☐ DOE

☐ Palpitations

☐ (-)Negative for (Patient denies symptoms of):

☐ Chest pain, HTN, PND, DOE, Palpitations

☐ Chest pain

☐ HTN

☐ PND

☐ DOE

☐ Palpitations

☐ Respiratory:

☐ GI/Digestive:

☐ GU/Urologic:

☐ Blood/Lymphatic:

☐ Endocrine:

☐ Musculoskeletal:

☐ Neurologic:

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.15. VA National Primary Care Note Template: VA Primary Care New Patient - Respiratory Section**

Template: VA PC New Patient

☐ Eyes:

☐ Ears:

☐ Nose:

☐ Mouth/Dental:

☐ Breast:

☐ Cardiac:

☒ Respiratory:

☐ (+)Positive symptoms reported:

☐ Cough, Wheeze, Dyspnea, DOE

☐ Cough

☐ Wheeze

☐ Dyspnea

☐ DOE

☐ (-)Negative for (Patient denies symptoms of):

☐ Cough, Wheeze, Dyspnea, DOE

☐ Cough

☐ Wheeze

☐ Dyspnea

☐ DOE

☐ GI/Digestive:

☐ GU/Urologic:

☐ Blood/Lymphatic:

☐ Endocrine:

☐ Musculoskeletal:

☐ Neurologic:

☐ Skin:

☐ (Comments):

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.16. VA National Primary Care Note Template: VA Primary Care New Patient - Gastroenterology (GI)/Digestive Section**

Template: VA PC New Patient

☒ GI/Digestive:

☐ All ROS symptoms negative for: change in appetite, dysphagia, heartburn, abdominal pain, belching/gas, hematemesis, hematochezia, melena, jaundice, hemorrhoids, change in bowel habits

☐ (+)Positive symptoms reported:

- ☐ change in appetite
- ☐ dysphagia
- ☐ heartburn
- ☐ abdominal pain
- ☐ belching/gas
- ☐ hematemesis
- ☐ hematochezia
- ☐ melena
- ☐ jaundice
- ☐ hemorrhoids
- ☐ constipation
- ☐ chronic laxative use
- ☐ diarrhea

☐ (-)Negative for (Patient denies symptoms of):

- ☐ change in appetite
- ☐ dysphagia
- ☐ heartburn
- ☐ abdominal pain
- ☐ belching/gas
- ☐ hematemesis
- ☐ hematochezia

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.17. VA National Primary Care Note Template: VA Primary Care New Patient - Gastroenterology (GI)/Digestive with Negative for Symptoms Section**

The screenshot shows a software window titled "Template: VA PC New Patient". Inside, there is a section titled "(-)Negative for (Patient denies symptoms of):" with a checked checkbox. Below this, there are several groups of symptoms, each with an unchecked checkbox:

- ☐ change in appetite
- ☐ dysphagia
- ☐ heartburn
- ☐ abdominal pain
- ☐ belching/gas
- ☐ hematemesis
- ☐ hematochezia
- ☐ melena
- ☐ jaundice
- ☐ hemorrhoids
- ☐ constipation
- ☐ chronic laxative use
- ☐ diarrhea
- ☐ GU/Urologic:
- ☐ Blood/Lymphatic:
- ☐ Endocrine:
- ☐ Musculoskeletal:
- ☐ Neurologic:
- ☐ Skin:
- ☐ (Comments:)

At the bottom of the window, there are buttons for "All", "None", "Preview", "OK", and "Cancel". A note "\* Indicates a Required Field" is also present.

**Figure A.18. VA National Primary Care Note Template: VA Primary Care New Patient - Genitourinary (GU)/Urologic and Male GU Sections**

Template: VA PC New Patient

☒ GU/Urologic:

☒ Male GU:

☒ All ROS symptoms negative for: dysuria, frequency, nocturia urgency, hematuria, incontinence, impotence, testicular pain/swelling

☐ (+)Positive symptoms reported:

☐ dysuria

☐ frequency

☐ nocturia

☐ urgency

☐ hematuria

☐ incontinence

☐ impotence

☐ testicular pain/swelling

☐ (-)Negative for (Patient denies symptoms of):

☐ dysuria

☐ frequency

☐ nocturia

☐ urgency

☐ hematuria

☐ incontinence

☐ impotence

☐ testicular pain/swelling

☐ Female GU:

☐ Blood/Lymphatic:

☐ Endocrine:

☐ Musculoskeletal:

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.19. VA National Primary Care Note Template: VA Primary Care New Patient - Genitourinary (GU)/Urologic and Female GU Sections**

The screenshot shows a software window titled "Template: VA PC New Patient". Inside, there are several sections with checkboxes:

- ☒ GU/Urologic:
  - ☐ Male GU:
  - ☒ Female GU:
    - ☐ All ROS symptoms negative for: dysuria, frequency, nocturia, urgency, hematuria, incontinence, amenorrhea, menorrhagia
    - ☐ (+)Positive symptoms reported: 
      - ☐ dysuria
      - ☐ frequency
      - ☐ nocturia
      - ☐ urgency
      - ☐ hematuria
      - ☐ incontinence
      - ☐ contraceptive use
      - ☐ amenorrhea
      - ☐ menorrhagia
    - ☐ (-)Negative for (Patient denies symptoms of): 
      - ☐ dysuria
      - ☐ frequency
      - ☐ nocturia
      - ☐ urgency
      - ☐ hematuria
      - ☐ incontinence
      - ☐ contraceptive use
      - ☐ amenorrhea
      - ☐ menorrhagia
- ☐ Blood/Lymphatic:
- ☐ Endocrine:

At the bottom, there are buttons: "All", "None", "\* Indicates a Required Field", "Preview", "OK", and "Cancel".

**Figure A.20. VA National Primary Care Note Template: VA Primary Care New Patient - Blood/Lymphatic Section**

Template: VA PC New Patient

☒ Blood/Lymphatic:

☐ (+)Positive symptoms reported: [Text Box]

- ☐ anemia, transfusion, easy bleeding, easy bruising, LN enlargement/pain
- ☐ anemia
- ☐ transfusion
- ☐ easy bleeding
- ☐ easy bruising
- ☐ LN enlargement/pain

☐ (-)Negative for (Patient denies symptoms of): [Text Box]

- ☐ anemia, transfusion, easy bleeding, easy bruising, LN enlargement/pain
- ☐ anemia
- ☐ transfusion
- ☐ easy bleeding
- ☐ easy bruising
- ☐ LN enlargement/pain

☐ Endocrine:

☐ Musculoskeletal:

☐ Neurologic:

☐ Skin:

☐ (Comments:)

☐ PHYSICAL EXAMINATION:

☐ (----- DATA REVIEW -----) DATA REVIEW:  
(Indicate pertinent data reviewed today: Labs, Tests, X-rays, Notes, D/C, etc)

[All] [None] \* Indicates a Required Field [Preview] [OK] [Cancel]



**Figure A.21. VA National Primary Care Note Template: VA Primary Care New Patient - Endocrine Section**

Template: VA PC New Patient

☐ Blood/Lymphatic:

☒ Endocrine:

☐ All ROS symptoms negative for: goiter, thyroid condition, polydipsia, polyuria and polydipsia, chronic prednisone tx

☐ (+)Positive symptoms reported:

☐ goiter

☐ thyroid condition

☐ polydipsia

☐ polyuria and polydipsia

☐ chronic prednisone tx

☐ (-)Negative for (Patient denies symptoms of):

☐ goiter

☐ thyroid condition

☐ polydipsia

☐ polyuria and polydipsia

☐ chronic prednisone tx

☐ Musculoskeletal:

☐ Neurologic:

☐ Skin:

☐ (Comments:)

☐ PHYSICAL EXAMINATION:

☐ (----- DATA REVIEW -----) DATA REVIEW:

(Indicate pertinent data reviewed today: Labs, Tests, X-rays, Notes, D/C, etc)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.22. VA National Primary Care Note Template: VA Primary Care New Patient - Musculoskeletal Section**

Template: VA PC New Patient

☒ Musculoskeletal:

☐ (-)Negative for (Patient denies symptoms of):

☐ Muscle cramps, joint pain or stiffness

☐ muscle cramps

☐ joint pain

☐ joint stiffness

☐ joint deformity

☐ joint(s) involved include:

☐ (+)Positive symptoms reported:

☐ Muscle cramps, joint pain or stiffness

☐ muscle cramps

☐ joint pain

☐ joint stiffness

☐ joint deformity

☐ joint(s) involved include:

☐ Neurologic:

☐ Skin:

☐ (Comments:)

☐ PHYSICAL EXAMINATION:

☐ (----- DATA REVIEW -----) DATA REVIEW:

(Indicate pertinent data reviewed today: Labs, Tests, X-rays, Notes, D/C, etc)

(Click here for expanded point and click data review)

☐ Lab results reviewed.

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.23. VA National Primary Care Note Template: VA Primary Care New Patient - Neurologic Section**

Template: VA PC New Patient

☒ Neurologic:

☐ (+)Positive symptoms reported:

- ☐ Headaches, dizziness, convulsions, memory loss, paralysis, loss of consciousness
- ☐ headaches
- ☐ dizziness
- ☐ convulsions
- ☐ memory loss
- ☐ paralysis
- ☐ loss of consciousness
- ☐ change in sensation
- ☐ poor coordination

☐ (-)Negative for (Patient denies symptoms of):

- ☐ Headaches, dizziness, convulsions, memory loss, paralysis, loss of consciousness
- ☐ headaches
- ☐ dizziness
- ☐ convulsions
- ☐ memory loss
- ☐ paralysis
- ☐ loss of consciousness
- ☐ change in sensation
- ☐ poor coordination

☐ Skin:

☐ (Comments:)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.24. VA National Primary Care Note Template: VA Primary Care New Patient - Skin Section**

Template: VA PC New Patient

poor coordination

☒ Skin:

☐ (+)Positive symptoms reported: [Text Box]

☐ Rash, lesions, acne, dry skin, itching, hives

☐ rash

☐ skin lesion

☐ acne

☐ dry skin

☐ hives

☐ itching

☐ (-)Negative for (Patient denies symptoms of): [Text Box]

☐ Rash, lesions, acne, dry skin, itching, hives

☐ rash

☐ skin lesion

☐ acne

☐ dry skin

☐ hives

☐ itching

☐ (Comments:)

☐ PHYSICAL EXAMINATION:

☐ (----- DATA REVIEW -----) DATA REVIEW:  
(Indicate pertinent data reviewed today: Labs, Tests, X-rays, Notes, D/C, etc)  
(Click here for expanded point and click data review)

[All] [None] \* Indicates a Required Field [Preview] [OK] [Cancel]

**Figure A.25. VA National Primary Care Note Template: VA Primary Care New Patient - Skin Section with Added Comments**

The screenshot shows a software window titled "Template: VA PC New Patient". The window contains a list of symptoms with checkboxes. The "Skin:" section is checked, and the "Comments:" section is also checked. The "Comments:" section has a large text area for input. The window has a standard Windows-style title bar with minimize, maximize, and close buttons. The bottom of the window has a toolbar with buttons for "All", "None", "\* Indicates a Required Field", "Preview", "OK", and "Cancel".

Template: VA PC New Patient

- ☐ memory loss
- ☐ paralysis
- ☐ loss of consciousness
- ☐ change in sensation
- ☐ poor coordination

☒ Skin:

☐ (+)Positive symptoms reported: [Text Box]

- ☐ Rash, lesions, acne, dry skin, itching, hives
- ☐ rash
- ☐ skin lesion
- ☐ acne
- ☐ dry skin
- ☐ hives
- ☐ itching

☐ (-)Negative for (Patient denies symptoms of): [Text Box]

- ☐ Rash, lesions, acne, dry skin, itching, hives
- ☐ rash
- ☐ skin lesion
- ☐ acne
- ☐ dry skin
- ☐ hives
- ☐ itching

☒ (Comments:)

[Large Text Area for Comments]

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.26. VA National Primary Care Note Template: VA Primary Care New Patient - Physical Examination and Eye Exam Sections**

Template: VA PC New Patient

☒ **PHYSICAL EXAMINATION:**

☐ (Click to add Vitals to Note ----- CONSTITUTIONAL ----- )

VITALS (most recent, as listed in the electronic record):

B/P: 128/95 (07/17/2017 09:31)

Pulse: 89 (07/17/2017 09:31)

Temperature: 98 F [36.7 C] (07/17/2017 09:31)

Weight: 220 lb [100.0 kg] (05/08/2017 08:43)

Height: 65 in [165.1 cm] (05/08/2017 08:43)

BMI:

Pain: 0 (07/17/2017 09:31) (0-10 scale)

☐ **APPEARANCE:** ☐ WD ☐ WN ☐ NAD ☐ Overweight ☐ Thin ☐ Emaciated

☐ (-----HEAD-----)

HEAD: (Document pertinent normal & abnormal in word processing field)

☒ Not examined. ☒ No sign of trauma. ☒ Evidence of trauma.

☒ (-----EYES-----)

EYE EXAM - (Document pertinent normal & abnormal in word processing field)

PUPILS: ☐ PERRLA. ☐ Anisocoria. ☒ Pupil abnormality.

RIGHT EYE: ☐ Not examined

LEFT EYE: ☐ Not examined

(OTHER PERTINENT FINDINGS:)

☐ (-----ENT-----)

EAR EXAM - (Document pertinent normal & abnormal in word processing field)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.27. VA National Primary Care Note Template: VA Primary Care New Patient - Ear, Nose, and Throat (ENT), Neck, and Chest Sections**

Template: VA PC New Patient

☒ (-----ENT-----)

EAR EXAM - (Document pertinent normal & abnormals in word processing field)

RIGHT: ☒ N/A. ☐ Normal TM. ☐ Abnormal TM. ☐ Impacted cerumen.

LEFT: ☒ N/A. ☐ Normal TM. ☐ Abnormal TM. ☐ Impacted cerumen.

NOSE: ☒ Not examined ☐ Normal ☐ Abnormal

OROPHARYNX: ☒ N/A ☐ No erythema. ☐ Mild erythema. ☐ Diffuse erythema.

(Comments:)

☒ (----- NECK -----)

(Document pertinent normal & abnormals in word processing field) THYROID:

☒ Not examined. ☐ No thyromegaly. ☐ (+) Thyroid enlarged.

NECK: ☒ Not examined. ☐ Supple. ☐ Muscle spasm. ☐ Nuchal rigidity.

CERVICAL ADENOPATHY: ☒ Not examined ☐ Absent. ☐ Present.

☒ (----- CHEST -----)

(Document pertinent normal & abnormals in word processing field) THORAX/CHEST:

☒ Not examined ☐ Normal ☐ Abnormal

LUNG AUSCULTATION: ☐ Clear ☐ Wheeze ☐ Rhonchi

LUNG PERCUSSION: ☐ Clear ☐ Hyperresonant ☐ Dull

☐ (----- CHEST/FEMALE -----)

(Document pertinent normal & abnormals in word processing field)

BREAST EXAM: ☒ Not examined ☐ Normal ☐ Abnormal

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.28. VA National Primary Care Note Template: VA Primary Care New Patient - Chest/Female and Cardiovascular Sections**

Template: VA PC New Patient

☒ (----- CHEST/FEMALE -----)

(Document pertinent normal & abnormal in word processing field)

BREAST EXAM: ☒ Not examined ☐ Normal ☐ Abnormal

☒ (----- CARDIOVASCULAR -----)

CARDIOVASCULAR -

NECK VEINS: ☒ Not examined. ☐ No JVD. ☐ (+) JVD: \_\_\_\_\_

HEART-PMI: ☐ 5th ICS MCL ☐ Laterally displaced ☐ Not found

INSPECTION: ☒ Not examined ☐ Normal ☐ Abnormal

RYTHYM: ☐ Regular ☐ Irreg. irregular ☐ Irregular

AUSCULTATION: ☐ No gallop ☐ S3 gallop ☐ S4 gallop

☐ No murmur ☐ (+) murmur \_\_\_\_\_

Click to describe murmur intens: 1/6 down arrow) & timing (L down arrow)

(EDEMA?) \_\_\_\_\_ (on:) \_\_\_\_\_

☐ ARTERIAL PULSES: (Describe Br \_\_\_\_\_ thrills if present)

R CAROTID:N/A ☒ L CAROTID:N/A ☒

R RADIAL :N/A ☒ L RADIAL :N/A ☒

R BRACHIAL:N/A ☒ L BRACHIAL:N/A ☒

R FEMORAL:N/A ☒ L FEMORAL:N/A ☒

R DORS. PEDIS:N/A ☒ L DORS. PEDIS:N/A ☒

R POST TIBIAL:N/A ☒ L POST TIBIAL:N/A ☒

All None \* Indicates a Required Field Preview OK Cancel



**Figure A.29. VA National Primary Care Note Template: VA Primary Care New Patient - Chest/Female and Cardiovascular Sections - Specifying Auscultation Murmur Drop-down**

Template: VA PC New Patient

☒ (----- CHEST/FEMALE -----)

(Document pertinent normal & abnormals in word processing field)

BREAST EXAM: ☒ Not examined ☐ Normal ☐ Abnormal

☒ (----- CARDIOVASCULAR -----)

CARDIOVASCULAR -

NECK VEINS: ☒ Not examined. ☐ No JVD. ☐ (+) JVD: \_\_\_\_\_

HEART-PMI: ☐ 5th ICS MCL ☐ Laterally displaced ☐ Not found

INSPECTION: ☒ Not examined ☐ Normal ☐ Abnormal

RYTHYM: ☐ Regular ☐ Irreg. irregular ☐ Irregular

AUSCULTATION: ☐ No gallop ☐ S3 gallop ☐ S4 gallop

☐ No murmur ☐ (+) murmur \_\_\_\_\_

Click to describe murmur intensity (Row) (EDEMA?) \_\_\_\_\_ (Location) \_\_\_\_\_

☐ ARTERIAL PULSES: (Describe Bruits or \_\_\_\_\_)

R CAROTID:N/A ☒ L CAROTID:N/A ☒

R RADIAL :N/A ☒ L RADIAL :N/A ☒

R BRACHIAL:N/A ☒ L BRACHIAL:N/A ☒

R FEMORAL:N/A ☒ L FEMORAL:N/A ☒

R DORS. PEDIS:N/A ☒ L DORS PEDIS:N/A ☒

R POST TIBIAL:N/A ☒ L POST TIBIAL:N/A ☒

Systolic murmur  
Systolic ejection murmur  
Holosystolic murmur  
Diastolic murmur  
Diastolic blowing murmur

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.30. VA National Primary Care Note Template: VA Primary Care New Patient - Chest/Female and Cardiovascular Sections - Specifying Edema Drop-down**

Template: VA PC New Patient

☒ (----- CHEST/FEMALE -----)

(Document pertinent normal & abnormals in word processing field)

BREAST EXAM: ☒ Not examined ☐ Normal ☐ Abnormal

☒ (----- CARDIOVASCULAR -----)

CARDIOVASCULAR -

NECK VEINS: ☒ Not examined. ☐ No JVD. ☐ (+) JVD:

HEART-PMI: ☐ 5th ICS MCL ☐ Laterally displaced ☐ Not found

INSPECTION: ☒ Not examined ☐ Normal ☐ Abnormal

RYTHYM: ☐ Regular ☐ Irreg. irregular ☐ Irregular

AUSCULTATION: ☐ No gallop ☐ S3 gallop ☐ S4 gallop

☐ No murmur ☐ (+) murmur (Location: )

Click to describe murmur intensity (R down arrow) & timing (L down arrow)

(EDEMA?) (Location: )

☐ ARTERIAL PULSATION (Location: )

R CAROTID: No edema.  
Trace edema.  
1+ edema.  
2+ edema.  
3+ edema.  
4+ edema.

L CAROTID: N/A

R RADIAL: N/A

L RADIAL: N/A

R BRACHIAL: N/A

L BRACHIAL: N/A

R FEMORAL: N/A

L FEMORAL: N/A

R DORS. PEDIS: N/A

L DORS. PEDIS: N/A

R POST TIBIAL: N/A

L POST TIBIAL: N/A

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.31. VA National Primary Care Note Template: VA Primary Care New Patient - Chest/Female and Cardiovascular Sections, Specifying Edema Location**

Template: VA PC New Patient

☒ (----- CHEST/FEMALE -----)

(Document pertinent normal & abnormals in word processing field)

BREAST EXAM: ☒ Not examined ☐ Normal ☐ Abnormal

☒ (----- CARDIOVASCULAR -----)

CARDIOVASCULAR -

NECK VEINS: ☒ Not examined. ☐ No JVD. ☐ (+) JVD: \_\_\_\_\_

HEART-PMI: ☐ 5th ICS MCL ☐ Laterally displaced ☐ Not found

INSPECTION: ☒ Not examined ☐ Normal ☐ Abnormal

RYTHYM: ☐ Regular ☐ Irreg. irregular ☐ Irregular

AUSCULTATION: ☐ No gallop ☐ S3 gallop ☐ S4 gallop

☐ No murmur ☐ (+) murmur \_\_\_\_\_

Click to describe murmur intensity (R down arrow) & timing (L down arrow)

(EDEMA?) \_\_\_\_\_ (Location:) \_\_\_\_\_

☐ ARTERIAL PULSES: (Describe Bruits or thr \_\_\_\_\_)

R CAROTID:N/A ☒

R RADIAL :N/A ☒

R BRACHIAL:N/A ☒

R FEMORAL:N/A ☒

R DORS. PEDIS:N/A ☒

R POST TIBIAL:N/A ☒

L RADIAL :N/A ☒

L BRACHIAL:N/A ☒

L FEMEROL:N/A ☒

L DORS PEDIS:N/A ☒

L POST TIBIAL:N/A ☒

Both feet  
Both ankles  
Both lower legs  
Right foot  
Right ankle  
Right lower leg  
Left foot  
Left ankle  
Left lower leg

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.32. VA National Primary Care Note Template: VA Primary Care New Patient - Arterial Pulses, R Carotid Section**

Template: VA PC New Patient

☒ ARTERIAL PULSES: (Describe Bruits or thrills if present)

R CAROTID: N/A ☐ L CAROTID: N/A ☐

R RADIAL: N/A ☐ L RADIAL: N/A ☐

R BRACHIAL: N/A ☐ L BRACHIAL: N/A ☐

R FEMORAL: N/A ☐ L FEMORAL: N/A ☐

R DORS. PEDIS: N/A ☐ L DORS. PEDIS: N/A ☐

R POST TIBIAL: N/A ☐ L POST TIBIAL: N/A ☐

☐ (----- ABDOMEN/GI -----)

ABDOMEN: (Document pertinent normal & abnormal, scars or hernias in word processing field)

Appearance: ☒ Flat. ☐ Distended. ☐ Ascites.

Palpation: ☐ Soft ☐ Non-tender ☐ Tender ☐ Tympanitic ☐ Firm

☐ No organomegaly ☐ No masses ☐ Hepatomegaly ☐ Splenomegaly

Bowel sounds: ☒ Normal. ☐ Decreased. ☐ Hyperactive. ☐ Absent.

RECTAL: ☒ Not Examined. ☐ Normal. ☐ Pertinent finding (see below):

☐ (----- GU/MALE -----)

MALE GU EXAM: (Document pertinent normal & abnormal in word processing field)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.33. VA National Primary Care Note Template: VA Primary Care New Patient - Extremities, Musculoskeletal, and Deep Tendon Reflexes Sections**

Template: VA PC New Patient

☒ (----- EXTREMITIES -----)

EXTREMITIES (Document pertinent normal & abnormals in word processing field)

UPPER: ☒ Not Examined. ☐ Normal. ☐ Pertinent finding (see below):

LOWER: ☒ Not Examined. ☐ Normal. ☐ Pertinent finding (see below):

☒ (----- MUSCULOSKELETAL -----)

LUMBAR BACK EXAM: (Document pertinent normal & abnormals in word processing field)

PALPATION: ☐ No tenderness ☐ Tenderness. ☐ (+) Muscle spasm.

STRAIGHT LEG LIFT: ☐ Negative. ☐ Positive. ☐ Not performed.

☒ (----- DEEP TENDON REFLEXES -----) DEEP TENDON REFLEXES

RT BICEPS: N/A  LT BICEPS: N/A

RT TRICEPS: 0  LT TRICEPS: N/A

RT PATELLA: 3+  LT PATELLA: N/A

RT ACHILLES: N/A  LT ACHILLES: N/A

☐ (----- NEUROLOGIC -----) NEUROLOGIC EXAM

CRANIAL NERVES: ☒ Not examined ☐ Normal ☐ Abnormal

MOTOR EXAM: ☒ Not examined ☐ Normal ☐ Abnormal

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.34. VA National Primary Care Note Template: VA Primary Care New Patient - Abdomen/Gastroenterology (GI), Genitourinary (GU)/Male, and GU/Female Sections**

Template: VA PC New Patient

☒ (----- ABDOMEN/GI -----)

ABDOMEN: (Document pertinent normal & abnormal, scars or hernias in word processing field)

Appearance: ☐ Flat. ☐ Distended. ☐ Ascites.

Palpation: ☐ Soft ☐ Non-tender ☐ Tender ☐ Tympanitic ☐ Firm

☐ No organomegaly ☐ No masses ☒ Hepatomegaly ☐ Splenomegaly

Bowel sounds: ☐ Normal. ☐ Decreased. ☐ Hyperactive. ☐ Absent.

RECTAL: ☒ Not Examined. ☐ Normal. ☐ Pertinent finding (see below):

☒ (----- GU/MALE -----)

MALE GU EXAM: (Document pertinent normal & abnormal in word processing field)

PROSTATE: ☒ Not examined ☐ Normal ☐ Abnormal

SCROTUM: ☒ Not examined ☐ Normal ☐ Abnormal

PENIS: ☒ Not examined ☐ Normal ☐ Abnormal

☒ (----- GU/FEMALE -----)

PELVIC EXAM: (Document pertinent normal & abnormal in word processing field)

PERINIUM: ☒ Not examined ☐ Normal ☐ Abnormal

VAGINA: ☒ Not examined ☐ Normal ☐ Abnormal

CERVIX: ☒ Not examined ☐ Normal ☐ Abnormal

BIMANUAL: ☒ Not examined ☐ Normal ☐ Abnormal

RECTAL: ☒ Not examined ☐ Normal ☐ Abnormal

☐ (----- EXTREMITIES -----)

EXTREMITIES (Document pertinent normal & abnormal in word processing field)

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.35. VA National Primary Care Note Template: VA Primary Care New Patient - Neurologic, Lymphatics, Dermatology, and Psychiatric Sections**

**Figure A.36. VA National Primary Care Note Template: VA Primary Care New Patient - Psychiatric, Data including Lab Results Reviewed**

Template: VA PC New Patient

☒ (----- PSYCHIATRIC -----) PSYCHIATRIC:  
 (Include assessment of 1) Judgment/insight, 2) Orientation to time, place, person, 3) recent and remote memory, 4) Mood/affect.)  
 JUDGMENT: ☐ Good ☐ Fair ☐ Poor ☒ Not examined  
 INSIGHT: ☐ Good ☐ Fair ☐ Poor ☒ Not examined  
 ORIENTATION:   
 MOOD: ☐ Alert ☐ Depressed ☒ Not evaluated

☐ RECENT MEMORY: ☐ Good ☐ Fair ☐ Poor ☐ Not examined  
 REMOTE MEMORY: ☐ Good ☐ Fair ☐ Poor ☐ Not examined

☐ MMSE SCORE:  (Mini-Mental Status Examination)

☒ (----- DATA REVIEW -----) DATA REVIEW:  
 (Indicate pertinent data reviewed today: Labs, Tests, X-rays, Notes, D/C, etc)  
 (Click here for expanded point and click data review)

☒ Lab results reviewed.  
☒ Date of lab: Jan   
 Results:  
☐ Unremarkable  
☐ Abnormal  
☐ Remarkable for  
 Follow-up Action:   
☐ None at this time  
☐ Recheck lab at future visit  
☐ Continue current treatment  
☐ Adjust medication

☐ HbA1C results reviewed.  
☐ LDL-cholesterol result reviewed.  
☐ Chest X-ray results reviewed.

All None \* Indicates a Required Field Preview OK Cancel



**Figure A.37. VA National Primary Care Note Template: VA Primary Care New Patient - HbA1c and Low-density lipoprotein (LDL)-cholesterol Results Reviewed**

Template: VA PC New Patient

☒ HbA1C results reviewed.

☐ Date of HbA1C:

Result:

☐ Acceptable

☐ Above target

☐ Within target range

Follow-up Action:

☐ None at this time

☐ Continue current treatment

☐ Adjust diabetic medications

☐ Refer to Dietitian

☐ Refer to Diabetes Clinic

☐ Other:

☒ LDL-cholesterol result reviewed.

☐ Date of LDL-cholesterol:

Result:

☐ Acceptable

☐ Above target

☐ Within target range

Follow-up Action:

☐ None at this time

☐ Continue current treatment

☐ Adjust diabetic medications

☐ Refer to Dietitian

☐ Refer to Diabetes Clinic

☐ Other:

☐ Chest X-ray results reviewed.

☐ X-Ray results reviewed.

☐ EKG reviewed.

☐ Progress Note was reviewed - date of note:

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.38. VA National Primary Care Note Template: VA Primary Care New Patient - X-ray Results Reviewed**

The screenshot shows a software window titled "Template: VA PC New Patient". It contains several sections for recording medical history and follow-up actions. The "Chest X-ray results reviewed" section is checked, and the "X-Ray results reviewed" section is also checked. The "EKG reviewed" section is unchecked. Below these are fields for "Progress Note was reviewed" and "Discharge Summary reviewed", both with date pickers. At the bottom, there are buttons for "All", "None", "Preview", "OK", and "Cancel", along with a note that an asterisk indicates a required field.

☒ Chest X-ray results reviewed.

☐ Date of Chest X-ray:

Results:

☐ Unremarkable

☐ Abnormal

☐ Remarkable for

Follow-up Action:

☐ None at this time

☐ Recheck X-ray at future visit

☐ Continue current treatment

☐ CT ordered

☐ Other:

☒ X-Ray results reviewed.

☐ Date of X-ray:

Results:

☐ Unremarkable

☐ Abnormal

☐ Remarkable for

Follow-up Action:

☐ None at this time

☐ Recheck X-ray at future visit

☐ Continue current treatment

☐ CT ordered

☐ Other:

☐ EKG reviewed.

☐ Progress Note was reviewed - date of note:

(To use the calendar style date box click here -->)

☐ Discharge Summary reviewed - date of summary:

(To use the calendar style date box click here -->)

\* Indicates a Required Field

**Figure A.39. VA National Primary Care Note Template: VA Primary Care New Patient – Electrocardiogram (EKG) Reviewed**

Template: VA PC New Patient

☒ EKG reviewed.

☐ Date of electrocardiogram:

Result:

☐ Unremarkable

☐ Abnormal

☐ Remarkable for

Follow-up Action:

☐ None at this time

☐ Recheck EKG at future visit

☐ Continue current treatment

☐ Medication adjusted

☐ Cardiology referral

☐ Other:

☒ Progress Note was reviewed - date of note:

(To use the calendar style date box click here -->)

☒ Discharge Summary reviewed - date of summary:

(To use the calendar style date box click here -->)

☒ Outside records were reviewed. (Comments:)

☒ (Comments:)

☐ (----- IMPRESSION/PLAN -----)

ASSESSMENT/PLAN:

(List: All symptoms or definitive diagnosis evaluated - including stability.  
List: Management, new medications/med changes, tests ordered with indication.  
List: F/U, consults, and diagnostic procedures ordered with indication)  
\*\*\* Include stability and management options \*\*\*

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.40. VA National Primary Care Note Template: VA Primary Care New Patient - Impression/Plan**

Template: VA PC New Patient

☒ (----- IMPRESSION/PLAN -----)

ASSESSMENT/PLAN:

(List: All symptoms or definitive diagnosis evaluated - including stability.  
List: Management, new medications/med changes, tests ordered with indication.  
List: F/U, consults, and diagnostic procedures ordered with indication)  
\*\*\* Include stability and management options \*\*\*

=====

CPT E&M CODING QUICK REFERENCE

E&M LEVEL 1

New Patient: All three areas, ( history, physical, medical decision making) must meet criteria  
History: HPI = 1-3, ROS = 0, PFSH = 0  
Physical: 1 body area or 1 organ system  
Medical Decision Making: Straight forward

Established Patient: Minimal problem not requiring the presence of physician. Used primarily by Non-physician, non-PA, non-ARNP, non CNS.

E&M LEVEL 2

New Patient: All three areas (history, physical, medical decision making) must meet criteria  
History: HPI = 1-3, ROS = 1, PFSH = 0  
Physical: 2-7 body areas or organ systems  
Medical Decision Making: Straight forward

Established Patient: 2 of the 3 areas (history, physical, medical decision making) must meet criteria  
History: HPI = 1-3, ROS = 0, PFSH = 0  
Physical: 1 body area or 1 organ system

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.41. VA National Primary Care Note Template: VA Primary Care New Patient - Evaluation and Management (E & M) Levels 3-5**

Template: VA PC New Patient

Medical Decision Making: Straight forward

Established Patient: 2 of the 3 areas (history, physical, medical decision making) must meet criteria  
 History: HPI = 1-3, ROS = 0, PFSH = 0  
 Physical: 1 body area or 1 organ system  
 Medical Decision Making: Straight forward

**E&M LEVEL 3**

New Patient: All three areas (history, physical, medical decision making) must meet criteria  
 History: HPI = 4, ROS = 2-9, PFSH = 1  
 Physical: 2-7 body areas or organ systems  
 Medical Decision Making: Low

Established Patient: 2 of the 3 areas (history, physical, medical decision making) must meet criteria  
 History: HPI = 1-3, ROS = 1, PFSH = 0  
 Physical: 2-7 body areas or organ systems  
 Medical Decision Making: Low

**E&M LEVEL 4**

New Patient: All three areas (history, physical, medical decision making) must meet criteria  
 History: HPI = 4, ROS = over 9, PFSH = 2 or 3  
 Physical: At least 8 body areas or organ systems  
 Medical Decision Making: Moderate

Established Patient: 2 of the 3 areas (history, physical, medical decision making) must meet criteria  
 History: HPI = 4, ROS = 2-9, PFSH = 1  
 Physical: 2-7 body areas or organ systems  
 Medical Decision Making: Moderate

**E&M LEVEL 5**

New Patient: All three areas (history, physical, medical decision making) must meet criteria  
 History: HPI = 4, ROS = over 9, PFSH = 2 or 3  
 Physical: at least 8  
 Medical Decision Making: High

All None \* Indicates a Required Field Preview OK Cancel

**Figure A.42. VA National Primary Care Note Template: VA Primary Care New Patient – Evaluation and Management (E & M) Level 5: Established Patients**

The screenshot shows a software window titled "Template: VA PC New Patient". The window contains text defining E&M Level 3, 4, and 5 criteria for New and Established patients. The criteria are listed as follows:

**E&M LEVEL 3**

New Patient: All three areas (history, physical, medical decision making) must meet criteria  
History: HPI = 4, ROS = 2-9, PFSH = 1  
Physical: 2-7 body areas or organ systems  
Medical Decision Making: Low

Established Patient: 2 of the 3 areas (history, physical, medical decision making) must meet criteria  
History: HPI = 1-3, ROS = 1, PFSH = 0  
Physical: 2-7 body areas or organ systems  
Medical Decision Making: Low

**E&M LEVEL 4**

New Patient: All three areas (history, physical, medical decision making) must meet criteria  
History: HPI = 4, ROS = over 9, PFSH = 2 or 3  
Physical: At least 8 body areas or organ systems  
Medical Decision Making: Moderate

Established Patient: 2 of the 3 areas (history, physical, medical decision making) must meet criteria  
History: HPI = 4, ROS = 2-9, PFSH = 1  
Physical: 2-7 body areas or organ systems  
Medical Decision Making: Moderate

**E&M LEVEL 5**

New Patient: All three areas (history, physical, medical decision making) must meet criteria  
History: HPI = 4, ROS = over 9, PFSH = 2 or 3  
Physical: at least 8  
Medical Decision Making: High

Established Patient: 2 of the 3 areas (history, physical, medical decision making) must meet criteria  
History: HPI = 4, ROS = over 9, PFSH = 2 or 3  
Physical: at least 8 body areas or organ systems  
Medical Decision Making: High

At the bottom of the window, there is a horizontal scrollbar and a row of buttons: "All", "None", "\* Indicates a Required Field", "Preview", "OK", and "Cancel".

**Figure A.43. VA National Primary Care Note Template: VA Primary Care Clinical Reminder Resolution Assessing Care of Vulnerable Elders (ACOVE) Functional Status**

Reminder Resolution: ACOVE Functional Status

KATZ ADL TOOL

Katz ADL Score Notes:  
 ADL independence = 1 point  
 ADL dependence = 0 point

Bathing: \*

☐ 1 POINT - Bathes self completely or needs help in bathing only a single part of the body such as back, genital area.  
☐ 0 POINT - Needs help bathing more than one body part of the body getting out of tub or shower. Requires total bathing.

Dressing: \*

☐ 1 point - Gets clothes from closets, etc, puts them on complete with fasteners. May have help tying shoes.  
☐ 0 point - Needs help with dressing self or needs to be completely dressed.

Toileting: \*

☐ 1 POINT - Goes to toilet, gets on and off, arranges clothes, cleans genital area without help.  
☐ 0 POINT - Needs help transferring to the toilet, cleaning self or uses bedpan or commode.

Transferring: \*

☐ 1 POINT - Moves in and out of bed or chair unassisted. Mechanical transferring aides are acceptable.  
☐ 0 POINT - Needs help in moving from bed to chair or requires a complete transfer.

Continence: \*

☐ 1 POINT - Exercises complete self control over urination and defecation.  
☐ 0 POINT - Is partially or totally incontinent of bowel or bladder.

Feeding: \*

☐ 1 POINT - Gets food from plate into mouth without help. Preparation of food may be done by another person.  
☐ 0 POINT - Needs partial or total help with feeding or requires parental feeding.

Katz ADL Index Total Points = \*

6 = High (patient independent)  
 0 = Low (patient very dependent)

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL) SCALE (Lawton)

☒ Begin assessment:

Ability to use telephone:

☐ 1 point - Operates telephone on own initiative; looks up and dials numbers, etc.  
☐ 1 point - Dials a few well-known numbers  
☐ 1 point - Answers telephone but does not dial  
☐ 0 points - Does not use telephone at all

Clear Clinical Maint Visit Info < Back Next > Finish Cancel

ACOVE Functional Status :

KATZ ADL TOOL  
 Katz ADL Score Notes:  
 ADL independence = 1 point  
 ADL dependence = 0 point

Health Factors: IADL ASSESSMENT COMPLETED, KATZ ADL INDEX DONE

\* Indicates a Required Field

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# Appendix B. Basic Laboratory Panel Definition

Blood Urea Nitrogen

Calcium

Chloride

CO<sub>2</sub> (Carbon Dioxide, Bicarbonate)

Creatinine

Glucose

Potassium

Sodium



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# Acronyms

Acronyms	Description
ACOVE	Assessing Care of Vulnerable Elders
BMI	Body Mass Index
BP	Blood Pressure
BPM	Beats Per Minute
CCWP	Clinical Content White Paper
CDS	Clinical Decision Support
CO2	Carbon Dioxide
DoD	Department of Defense
E&M	Evaluation and Management
EKG	Electrocardiogram
ENT	Ears, Nose, Throat
GI	Gastroenterology
GU	Genitourinary
HEENT	Head, Eyes, Ears, Nose, Throat
HL7	Health Level 7
KBS	Knowledge Based Systems
KNART	Knowledge Artifact
LDL	Low-density Lipoprotein
OIIG	Office of Informatics and Information Governance
OTC	Over the Counter
PTSD	Post-Traumatic Stress Disorder
SME	Subject Matter Expert
TO	Task Order
USPSTF	United States Preventive Services Task Force
VA	Department of Veterans Affairs
VACO	VA Central Office
VAMC	VA Medical Center